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## RECERPEDIX B

#### State of South Dakota

JAN 0 2 2002

# Candidate's or Committee's Report of Receipts and Expenditures

Candidates and candidate committees: File in the office where you filed your nominating petition.

PACs, political party, ballot question and other committees: File with Elections Department, Secretary of State's Office,

500 E Capitol Ave, Pierre, SD 57501-5070

See pages 9 & 10 of the Guideline Book for specific instructions on completing this report. Name of Candidate or Committee AKNOLA MI BEOWN Complete Mailing Address 1718 Teton PASS Brookings 5, 5, 57006 Name of Person Making Report ARNOVO M BROWN Phone If you are a candidate, what office are you seeking Disti7 - SENATOR If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed. Type of Report (See pages 4 & 5 of Guideline Book) LEGIS/afive For Reporting Period Ending (See pages 4 & 5 of Guideline Book) (2-3)-0. The following verification must be completed before submitting report. VERIFICATION OF PERSON MAKING REPORT (print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete. Date: 12 - 28 - 02 Signature of Committee Treasurer or Chairperson Revised July 2001 Filed this\_

SECRETARY OF STATE

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Name	of	Candidate	or	Committee	ARNOLD	M.	BROU

For the reporting period ending 12-31-02

#### Schedule A - Direct Contributions

This schedule is used for reporting all direct contributions. You must keep a record of all contributors, but for this report you may combine all contributions of \$100 or less from individuals and the same from political parties and enter these sums as unitemized contributions on their respective lines below and on the next page. Any contribution of more than \$100 or aggregate during a calendar year from an individual or political party and all contributions from PAC's must be entered as a separate item (itemized) giving the amount, name, address and place of employment (if applicable) of the contributor. Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space, or you may attach additional sheets of paper.

Unitemized Contribut	ions from Individuals:		*\$25,
Itemized Contributio	ns from Individuals		
Name	Residence Address	Place of Employment (Name of Employer)	
Doug Brown	5704 West 52ml St Slove Falls 5.D. 57106	BANKFIRST	\$ <i>250.</i>
/			\$
			\$
			\$
	<u> </u>		\$
, 10 - 10			\$
334,7			\$
			\$
, <del>*</del> "			\$
······			\$
			\$
			\$
			\$
14.9			\$
			\$
<u></u>	***		\$
			\$
			\$
		<u> </u>	

\*\$ 250.

Name of Candidate or Committee ARNOLOM, BROWNFor the reporting period ending 12-31-02

## Schedule A - Direct Contributions (continued)

Unitemized Contributions from Political Parties:	*\$ <i>00</i> ~
Itemized Contributions from Political Parties	

Party Name	Address	
		\$
		\$
Total of Itamized Contributions	from Political Parties.	*8-0-

Itemized Contributions from Political Action Committees (PAC's)

Itemized Contributions from Poli		2.1410
(All contributions from PAC Name	PAC's must be itemized.) Address	
Well Pac-Well Marly	636 Grand ane 5.54tion 13 DES MOINES, Ia 50309	\$ <i>100</i> ,
citigroup	90/159h 55 5w Swite 300 Washington DC 20005	\$/00,
AGC Bullingchapter	Brooking 5. D. 57006	\$ 100-
BIPAC (Busines & Sulvating)	Bokox 190 Previe 5.A 57501	\$ 150.
SDREC (Retailor ansoc)	Po 150x 638 Sierie 50 5750/	\$ <i>150</i> ,
avertie Phormasuticale	457 fortland are #/216	\$ <i>100.</i>
5 D Chropractors	Brookings F.D. 57006	\$ <i>100</i> ,
SDHealth Care assoc	Sione Fall 68.57104-209	\$ 200.
Quest Corp	125 5, Dahota ove Shafloon 51 Mc Falls 5 \$ 57/94	\$100.
SDCRNA	45 18 KIVEN Oaks De.	\$ 100.
IFA-50	po Box 277 previe 6.4.5750/	\$200.
ACE	POBOR 84001	\$ -50
SDI	SION Fall SA 57118	\$ /00
SDAHO	3708 Brook Place	\$ 250
PEPAC	100 Rt. 206 N.	\$ 100
IVIAU	Peaperky N.J. 07977	s
		'

Total Itemized Contributions from Political Action Committees: \*\$ 1900,

Total of All Direct Contributions (Sum of all lines with an \*) \$2/75,

Name of Candidate or Committee ARNULL M. Bredwe

## Schedule B - Fund-Raising Events Proceeds

List on this schedule fund-raising events held to raise money for the candidate and the net proceeds derived from each event. If a contributor gives more than \$100 or their contribution results in their aggregate being more than \$100 in the calendar year, those contributions must be itemized on Schedule A.

Type of Event

Net Proceeds

Total: \$\_\_\_\_\_\_

#### Schedule C - In Kind Contributions

Report all non-cash contributions of goods or services and the estimated fair market value. If the value exceeds \$100, the name of the contributor, residence address and place of employment must be reported.

Nature of Non-Cash Contribution

Estimated Value

Name of Contributor

Total: \$\_\_\_\_\_

#### Schedule D - Other Income

Use this schedule to report any refunds, interest earned or other income which is not a direct contribution.

Source of Income

Amount

Total: \$

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Name of Candidate or Committee	RNOVA MI	Skowa	
For the reporting period ending/	2-31-02		
Schedule B - Fund-	Raising Events Proc	eeds	
List on this schedule fund-raising events held to raise money for the candidate and the net proceeds derived from each event. If a contributor gives more than \$100 or their contribution results in their aggregate being more than \$100 in the calendar year, those contributions must be itemized on Schedule A.			
Type of Event	Net Proceeds		
	1., ++=++	and the second s	
		Total: 5-0-	
Schedule C - I	n Kind Contributions		
Schedule C - In Report all non-cash contributions of goods or service exceeds \$100, the name of the contributor, resident	ces and the estimated fair ma	rket value. If the value	
Report all non-cash contributions of goods or service	ces and the estimated fair ma	rket value. If the value	
Report all non-cash contributions of goods or service exceeds \$100, the name of the contributor, residence	ces and the estimated fair ma ce address and place of emplo	rket value. If the value oyment must be reported.	
Report all non-cash contributions of goods or service exceeds \$100, the name of the contributor, residence	ces and the estimated fair ma ce address and place of emplo	rket value. If the value oyment must be reported.	
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Report all non-cash contributions of goods or service exceeds \$100, the name of the contributor, resident Nature of Non-Cash Contribution	ces and the estimated fair made address and place of employees Estimated Value	rket value. If the value byment must be reported.  Name of Contributor	
Report all non-cash contributions of goods or service exceeds \$100, the name of the contributor, resident Nature of Non-Cash Contribution	ces and the estimated fair made address and place of employed Estimated Value  D - Other Income	rket value. If the value byment must be reported.  Name of Contributor  Total: \$ - 0 -	

Source of Income

Amount

Name of Candidate or Committee ALNOCA M. Brown
For the reporting period ending 12-31-02

## Schedule E - Expenditures

This schedule is to report all expenditures relating to a candidate's campaign. Line items have been provided for reporting common expenses. All other expenses should be listed. All contributions to candidates and committees must be listed individually.

Contributions Made to Candidates and Committees: Amount Item 488 Advertising Consulting 321.27 Postage Printing Rent Salaries 622.28 Telephone Travel Utilities Other Expenses:

Todging & Medh 410-75

Contributions: Judy Clark 25.

Plany Negatal 25.

Rich baltgast 25.

Al aber 50

Bill Japhlon 100

Male Roserds 150

John Hume 100

College Republicans 60

producy lo-Republican 50

Name of Candidate or		a M BEDWN		
For the reporting period ending / 3 / 5 / 5 / 5 / 5 / 5 / 5 / 5 / 5 / 5				
This schedule is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation.				
Owed To	Purpose	Amount		
		م <del>نوبه المنظمة ا</del>		

Total Obligations: \$\_\_\_\_\_

Name of Candidate or Committee Annous M. Brown No. 1800 N

#### **Summary Page**

This summary sheet will give a brief outline of all campaign finance activity during this reporting period. Please transfer all totals from the schedules previously completed.

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1.	Amount on hand, if any, at beginning of reporting period	\$ <u>961.77</u>
2.	Receipts	
	Schedule A - Direct Contributions \$ 2/75	
	Schedule B - Fund-Raising Events \$O	
	Schedule C - In Kind Contributions \$ -0 -	
	Schedule D - Other Income \$	
	Total of all receipts \$\frac{2/75}{}\$	
3.	Total Monetary Receipts (A+B+D)	\$ <u>2/75,</u>
4.	Candidate's Personal Contribution to Own Campaign	\$ 500.
5.	Monetary Loans to Candidate or Committee During Reporting Period	\$ <u>-0-</u>
6.	Monetary Loans Repaid During Reporting Period	\$ <u>-0-</u>
7.	Expenditures - Schedule E	\$ 3096.96
8.	Unpaid Obligations - Schedule F \$ -0-	
9.	Amount on hand at the close of this reporting period. This should equal lines (1+3+4+5)-(6+7)	\$ <u>539.81</u>